IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Application No. 09/896,836

Applicant LEYSIEFFER, HANS

Filed JULY 2, 2001

Title SYSTEM FOR REHABILITATION OF A HEARING DISORDER

Art Unit 2654

Examiner HARPER, V. PAUL

Atty Docket No. COCH-0182-US1

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The below-identified communication(s) is (are) submitted in the abovecaptioned application or proceeding:

 \boxtimes Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page)

Respectfully submitted,

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July 17, 2006

JUL 1 8 2006

PTO/SB/82 (09-03)
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Application Number 09/896,836

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	09/896,836				
Filing Date	July 2, 2001				
First Named Inventor	LEYSIEFFER, Hans				
Art Unit	2654				
Examiner Name	HARPER, V. Paul				
Attorney Docket Number	COCH-0182-US1				

I hereby revoke all previous powers of attorney given in the above-identified application.							
A Pow	er of Attorney	s submitted herewith.					
OR ✓ I hereby appoint the practitioners associated with the Customer Number: 22,506							
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 22,506 OR							
Firm o	r ual Name	Jagtiani + Guttag					
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Country		United States					
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am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
		SIGNATURE of Applic	cant or As	ssignee	of Record		
Name	Name Jayne Andrews						
Signature	augs see						
Date	L .	of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one					
	es of all the inventors ired, see below*.	or assignees of record of the entire inte	rest or their re	presentativ	e(s) are required. Subm	ut multiple	torms if more than one
Z :Total	of 1 form	e are submitted					

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/96 (08-03)

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STATE	EMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Leysieffer, et al.	
Application No./Patent No.: 09/896,836	Filed/Issue Date: July 2, 2001
Entitled: System for Rehabilitation of a He	aring Disorder
Cochlear Limited	, a Corporation
(Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. ☑ the assignee of the entire right, title, and in	terest; or
 an assignee of less than the entire right, tit The extent (by percentage) of its ownership in the patent application/patent identified above be 	p interest is%
A. [] An assignment from the inventor(s) of the in the United States Patent and Trademark attached.	patent application/patent identified above. The assignment was recorded Office at Reel, Frame, or for which a copy thereof is
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below: Hans Leysieffer and Bernd Wal	Implex Aktiengesellschaft Hearing Technology To:
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	of title are listed on a supplemental sheet.
[] Copies of assignments or other documents in [NOTE: A separate copy (i.e., the original as must be submitted to Assignment Division in recorded in the records of the USPTO. See	ssignment document or a true copy of the original document) a accordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below)	is authorized to act on behalf of the assignee.
17 JULY 2006	Jayne Andrews
Date	Typed or printed name
011-61-294286555	- faxedon
Telephone number	/ Signature
	Patent Manager
	Title ·

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